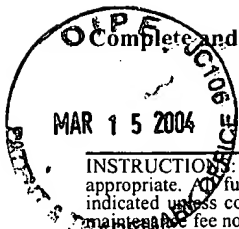


03-16-04

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

27652 7590 12/19/2003

JOSHUA D. ISENBERG  
 204 CASTRO LANE  
 FREMONT, CA 94539

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Bing Li	(Depositor's name)
Bing Li	(Signature)
3/15/2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/724,948	11/28/2000	Behrang Behin	ONX-110	9171

TITLE OF INVENTION: CAPACITIVE SENSING SCHEME FOR DIGITAL CONTROL STATE DETECTION IN OPTICAL SWITCHES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	03/19/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
KITOV, ZEEV	2836	361-207000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. JDI PATENT
2. Joshua D. Isenberg
- 3.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

## 4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee
- ☐ Advance Order - # of Copies \_\_\_\_\_

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- ☐ A check in the amount of the fee(s) is enclosed.
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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Joshua D. Isenberg

3/15/2004

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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03/18/2004 TLWJ22 00000007 09724948 1330.00 DP

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## FEE TRANSMITTAL

Application Number:	09/724,948
Filing Date:	November 28, 2000
First Named Inventor:	Behrang Behin
Title of Invention:	CAPACITIVE SENSING SCHEME FOR DIGITAL CONTROL STATE DETECTION IN OPTICAL SWITCHES
Group Art Unit:	2836
Examiner:	Zeev Kitov
Agent's Docket No.:	ONX-110

**Fee Calculation:**  
for ☒ Large Entity / ☐ Small Entity.

**Basic Billing Fee:**

<input type="checkbox"/> Utility Patent Application:	\$750 / \$375	\$
<input type="checkbox"/> Provisional Patent Application:	\$160 / \$80	\$

**Claims:**

<input type="checkbox"/> Number of Total Claims Over 20: <input type="checkbox"/>	x \$18 / \$9 =	\$
<input type="checkbox"/> No. of Independent Claims Over 3: <input type="checkbox"/>	x \$84 / \$42 =	\$

**Other Fees:**

<input type="checkbox"/> Extension of time, 1 month	\$110 / \$55	\$
<input type="checkbox"/> Extension of time, 2 months	\$420 / \$210	\$
<input type="checkbox"/> Extension of time, 3 months	\$950 / \$475	\$
<input type="checkbox"/> Extension of time, 4 months	\$1480 / \$740	\$
<input type="checkbox"/> Missing Parts Surcharge (Regular Application)	\$130 / \$65	\$
<input type="checkbox"/> Missing Parts Surcharge (Provisional Application)	\$50 / \$25	\$
<input type="checkbox"/> Recordation of Assignment Document	\$40	\$
<input checked="" type="checkbox"/> Issue Fee	\$1330 / \$665	\$ 1330
<input type="checkbox"/> Publication Fee	\$300	\$
<input type="checkbox"/> Printed Patent; Number of Copies: <input type="checkbox"/>	x \$3 =	\$

**TOTAL PAYMENT:** \$1330

**Method of Payment:**  
☒ Payment Enclosed  
☒ Credit Card Payment Form (PTO-2038 for \$1330)

**Signature of Applicant, Attorney, or Agent**

Joshua D. Isenberg 3/15/2004  
Joshua D. Isenberg, Reg. No. 42088 Date

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Bing Li 3/15/2004  
DATE OF MAILING: 3/15/2004

**SIGNATURE** BING LI **EXPRESS MAIL LABEL NO:** ET531400041US

**NAME OF PERSON SIGNING**



<b>TRANSMITTAL FORM</b>  (for all correspondence after initial filing)	Attorney Docket No. <b>ONX-110</b>	Total Pages
	Application Number <b>09/724,948</b>	
	Filing Date <b>NOVEMBER 28, 2000</b>	
	First Named Inventor <b>BEHRANG BEHIN</b>	
	Group Art Unit <b>2836</b>	
	Examiner <b>ZEEV KITOV</b>	

ENCLOSURES (check all that apply)	
<input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)	<input type="checkbox"/> Response to Notice of Missing Parts
<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Issue Fee Transmittal PTOL-85
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment papers
<input type="checkbox"/> Response/Amendment	<input type="checkbox"/> Power of Attorney by Assignee
<input type="checkbox"/> After Final Rejection	<input type="checkbox"/> IDS/PTO-1449
<input type="checkbox"/> After Allowance communication to Group	<input type="checkbox"/> with copies of cited references
<input type="checkbox"/> with Corrected Drawing(s) Total Sheets: <input type="checkbox"/>	<input type="checkbox"/> New Power of Attorney and Revocation of Old
<input type="checkbox"/> with Affidavits/Declarations	<input type="checkbox"/> Change of Correspondence Address
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Other:
<input type="checkbox"/> Express Abandonment Request	

SIGNATURE OF AGENT	
NAME	<b>JOSHUA D. ISENBERG, REG. NO. 41,088</b>
Signature	<i>Joshua D. Isenberg</i>
Date	<i>March 15, 2004</i>

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<i>Bing Li</i> SIGNATURE	DATE OF MAILING: <i>3/15/2004</i>
<i>BING LI</i> NAME OF PERSON SIGNING	EXPRESS MAIL LABEL NO: <i>ET 531400041 US</i>